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FAX NO.:	(571) 273-8300					
FROM:	Kin-Wah Tong, Esq.					
DATE:	January 3, 2006					
MATTER:	U.S. Serial No.: 10/721,864	filed: November 26, 2003				
DOCKET NO.:	113692CON-2					
APPLICANT:	Charles D. Combs					
The following has been re	eceived in the U.S. Patent and Trac	demark Office on the date of this facsimile:				
Petition for Extension	on of Time	X Transmittal Letter				
Disclosure Statemen		X Fee Transmittal (2 copies)				
Notice of Appeal		X Deposit Account Transaction				
X Response to Final C	Office Action	X Facsimile Transmission Certificate				
X Terminal Disclaime	er	dated January 3, 2006 X Copy of previously filed Power of Attorney, Revocation Change of Correspondence Address				
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I hereby certify that this P.O. Box 1450, Alexandr	correspondence is being transmiria, VA 22313-1450 on <u>January 3</u>	tted by facsimile to Commissioner for Patents,				
Kin-Wah Tong		January 3, 2006				
Name of person signing t	his certificate	Signature and date				

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TRANSMITTAL FORM			Application Number	₃r	10/721,864	1	7	
			Filing Date		November 26, 2003			
			First Named Inventor		Charles D. Combs			
			Art Unit		2638			
the he would for all parameters after a latter to the fillings			Examiner Name		Phan, Hanh			
(it be used for all correspondence after initial filing) Total Mumber of Pages in This Submission			Attorney Docket N	umber	113692CON-2			
		ENCLO	SURES (check all the	at apply)	<u> </u>			
Fee Transmittal Form	Drawing(s			After Alic	owance Communication to TC	,		
Fee Attached		Licensing	-related Papers		Appeal Communication to Board of Appeals and Interferences			
Amendment / Reply		Petition			Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)			
After Final			Convert to a al Application		Proprietary Information			
Affidavits/declaration	(3)	Change of	Attorney, Revocation of Correspondence Add previously filed Power		Status Letter			
Extension of Time Reque	est	⊠ Terminal	Disclaimer		Other Enclosure(s) (please identify below):			
Express Abandonment Request			for Refund ber of CD(s)		Certificate of	f Facsimile Transmission		
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Certified Copy of Priority Execument(s)		Remarks						
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	SIGI	NATURE OF	APPLICANT, ATTO	RNEY, OI	RAGENT			
Firm Patterson & Sh			eridan, LLP		·			
Signature		4	W/	2				
Printed Name Kin-Wah Tong.								
Date January 3, 2006			Reg. No. 39,400					
			TE OF TRANSMISS					
I hereby certify that this con Service with sufficient post Alexandria, VA 22313-1450	age as fir	st class mail i	in an envelope addre	he USPTO ssed to: C	or deposited commissioner	with the United States Pos for Patents, P.O. Box 145	tai iO,	
Signature			2/16_					
Twoed or printed name	Kin-Wah	Tono			Date	January 3, 2006		

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Patent and Traderhark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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January 3, 2006

Date

PTO/SB/17 (12-04v2)
Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

	ive on 12/08/		4818)		Complete	ff Known	
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				ation Number	10/721,864		
FEE TRANSMITTAL			Filing C		November 26, 200	3	RECEIVED
for	FY 2	005	First N	amed Inventor	Combs		CENTRAL FAX CENT
Applicant claims sma	II entity sta	tus. See 37 CFR 1.	27 Examir	ner Name	Phan, Hanh		
			Art Uni	t	2638		JAN 0 3 2006
TOTAL AMOUNT OF PA	YMENT	(\$) 130	Attorne	ry Docket No.	113692CON2	i	
METHOD OF PAYMEN	T (check a	il that apply)					
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☑ Ceposit Account D	eposit Acco	unt Number: 20-0782	2	Deposit Accou	unt Name: Patte	rson & Sherida	in, LLP
For the above-id	entified dep	osit account, the Dire	ector is hereby	authorized to: (e	check all that ap	oly)	
Charge fe	-		-				pt for the filing fee
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Under 37	CFR 1.16 a	nd 1.17			•		
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FEE CALCULATION							
1. BASIC FILING, SEA				rrro	EVASSINI	YOU FEED	
	FILING	FEES Small <u>Entity</u>	SEARCH	Small Entity		ATION FEES Small Entity	
Application Type	Fee (\$)	Fee(\$)	Fee(\$)	Fee(\$)	Fee(\$)	Fee(\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FE							Small Entity
Fee Description						Fee (\$)	Fee (\$)
Each claim over 20 (includina F	Reissues)				50	25
Each independent cla	aim over 3	(including Reissue	es)			200	100
Multiple dependent c						360	180
Total Claims	Extra (<u>) Fee</u>	Paid (\$)			Dependent Claims
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<u>Indep. Claims</u>	Extra () <u>Fee</u>	Paid (\$)			
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APPLICATION SIZE If the specification and		aveged 100 cheets	s of naner (e)	veluding electr	ronically filed so	enuence or c	omouter
listinas under 3	7 CFR 1.5	i2(e)), the applicati	on size fee d	ue is \$250 (\$1	125 for small e	ntity) for each	additional 50
sheets or fracti	on thereof	. See 35 U.S.C. 41	(a)(1)(G) and	37 CFR 1.16	S(s).		
Total Sheets	Extra Si	neets Number	of each add	itional 50 or f	fraction there	of Fee (\$)	<u>Fee Paid (\$)</u>
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SUBMITTED BY		f ret	[a	stantan Na			
		1/8/	Kegi	stretion No.	39.400	Telephone	(732) 530-9404

KIN-WAH TONG This collection of information is required by 37 CFR 1.138. The Information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gethering, preparing, and submitting the completed application from to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, myould be sent to the Chief information Officer, U.S. Pepariment of Commerce, P.O. Box 1450, Alyxandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, VA 22313-1460.

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